



AMENDMENT TRANSMITTAL LETTER

Docket No.
02291/100H204-US1

Application No. 10/643,003-Conf. #2972	Filing Date August 18, 2003	Examiner E. Peselev	Art Unit 1623
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Applicant(s): Zhongming Zeng

PHARMACEUTICAL COMPOSITIONS FOR PROMOTING THE GROWTH OF GRAM-INVENTION: POSITIVE BACILLI AND INCREASING THE ACIDITY IN VAGINA AND THE USE THEREOF

TO THE COMMISSIONER FOR PATENTS

Transmitted herewith is an amendment in the above-identified application.

The fee has been calculated and is transmitted as shown below.

CLAIMS AS AMENDED					
	Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate	
Total Claims	19	- 20 =		x	
Independent Claims	2	- 3 =		x	
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					
Other fee (please specify): Submission of an Information Disclosure Statement					180.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:					180.00

Large Entity

Small Entity

No additional fee is required for this amendment.

Please charge Deposit Account No. _____ in the amount of \$ _____. A duplicate copy of this sheet is enclosed.

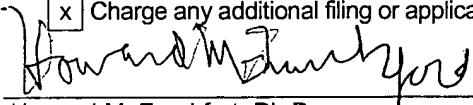
A check in the amount of \$ 180.00 to cover the filing fee is enclosed.

Payment by credit card. Form PTO-2038 is attached.

The Director is hereby authorized to charge and credit Deposit Account No. 04-0100 as described below. A duplicate copy of this sheet is enclosed.

Credit any overpayment.

Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.

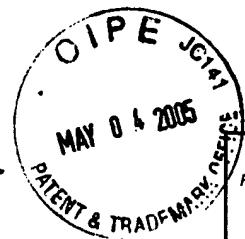

Howard M. Frankfort, Ph.D.
Attorney Reg. No.: 32,613

Dated: May 4, 2005

DARBY & DARBY P.C.
P.O. Box 5257
New York, New York 10150-5257
(212) 527-7766

Express Mail Label No. _____ Dated: _____

Under the Paperwork Reduction Act of 1995, no person are required to respond to a collection of information unless it displays a valid OMB control number.



Effective on 12/08/2004.

Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

FEE TRANSMITTAL For FY 2005

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT	(\$)	180.00
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Complete if Known

Application Number	10/643,003-Conf. #2972
Filing Date	August 18, 2003
First Named Inventor	Zhongming Zeng
Examiner Name	E. Peselev
Art Unit	1623
Attorney Docket No.	02291/100H204-US1

METHOD OF PAYMENT (check all that apply)

Check Credit Card Money Order None Other (please identify): _____
 Deposit Account Deposit Account Number: 04-0100 Deposit Account Name: Darby & Darby P.C.

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee
 Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17 Credit any overpayments

FEE CALCULATION**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

<u>Application Type</u>	<u>FILING FEES</u>		<u>SEARCH FEES</u>		<u>EXAMINATION FEES</u>		<u>Fees Paid (\$)</u>
	<u>Fee (\$)</u>	<u>Small Entity</u>	<u>Fee (\$)</u>	<u>Small Entity</u>	<u>Fee (\$)</u>	<u>Small Entity</u>	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

2. EXCESS CLAIM FEESFee Description

Each claim over 20 (including Reissues)

<u>Fee (\$)</u>	<u>Small Entity</u>
50	25
200	100
360	180

Each independent claim over 3 (including Reissues)

Multiple dependent claims

<u>Total Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>	<u>Multiple Dependent Claims</u>
19	- 20 =	x	=	<u>Fee (\$)</u> <u>Fee Paid (\$)</u>
2	- 3 =	x	=	_____

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

<u>Total Sheets</u>	<u>Extra Sheets</u>	<u>Number of each additional 50 or fraction thereof</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>
_____	- 100 =	/50 _____ (round up to a whole number) x _____ =	_____	_____

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

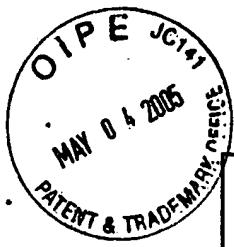
Other (e.g., late filing surcharge): 1806 Submission of an Information Disclosure Statement 180.00

SUBMITTED BY

Signature		Registration No. (Attorney/Agent)	32,613	Telephone	(212) 527-7736
Name (Print/Type)	Howard M. Frankfort, Ph.D.		Date	May 4, 2005	

Express Mail Label No.

Dated: _____



Application No. (if known): 10/643,003

Attorney Docket No.: 02291/100H204-US1

Certificate of Express Mailing Under 37 CFR 1.10

I hereby certify that this correspondence is being deposited with the United States Postal Service as Express Mail, Airbill No. EV 447563725 US, in an envelope addressed to:

MS Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

on May 4, 2005
Date



Signature

Judy Yeddo

Typed or printed name of person signing Certificate

Registration Number, if applicable

Telephone Number

Note: Each paper must have its own certificate of mailing, or this certificate must identify each submitted paper.

Amendment in Response to Non-Final Office Action (13 pages)
Amendment transmittal (1 page)
Information Disclosure Statement (2 pages)
PTO form SB/08 (1 reference)
Fee Transmittal (1 page)
Check No. **8471** in the amount of \$180
Return Receipt Postcard